During the complaint investigation number 26219, 26290, conducted on August 19, 2010, at Northside Healthcare Center, no deficiencies were cited in relation to the complaint under chapter 1200-8-6, Standards for Nursing Homes.

1200-8-6-04(21) Administration

(21) All health care facilities licensed pursuant to T.C.A. §§ 68-11-201, et. seq. shall post on a sign no smaller than eight and one-half inches (8½”) in width and eleven inches (11”) in height the following in the main public entrance:

(a) a statement that any person, regardless of age, who may be the victim of domestic violence may call the nationwide domestic violence hotline, with that number printed in boldface type, for immediate assistance.

This Rule is not met as evidenced by:
Based on observation and interview the facility failed to post correct information regarding the ombudsman.

The findings included:

Observation and tour of the facility on August 17, 2010, revealed the ombudsman information posted with the incorrect information of the name of ombudsman.

Interview with the ombudsman per telephone on August 18, 2010, at 10:10 a.m., revealed the
**Division of Health Care Facilities**

**STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION**

**ID & PROVIDER/SUPPLIER/Clinical Agency IDENTIFICATION NUMBER:**

TN7508

**MULTIPLE CONSTRUCTION SITE**

- **A. BUILDING**
- **B. WING**

**DATE SURVEY COMPLETED:**

08/19/2010

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**NAME OF PROVIDER OR SUPPLIER:**

NORTHSIDE HEALTH CARE CENTER

**STREET ADDRESS, CITY, STATE, ZIP CODE:**

202 EAST MTCS ROAD
MURFREESBORO, TN 37130

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<table>
<thead>
<tr>
<th>ID</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES</th>
<th>PROVIDER'S PLAN OF CORRECTION</th>
<th>COMPLETE DATE</th>
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   current ombudsman had sent to the facility the new and correct information in June, 2009.

   Interview with the Director of Nursing on August 18, 2010, at 2:55 p.m., in the hallway, confirmed the correct information regarding the ombudsman was not posted until August 18, 2010.

   Interview on August 18, 2010, with a group of eleven resident revealed the residents were aware of the change and knew about the new ombudsman. | N 430 | (Each corrective action should be cross-referenced to the appropriate deficiency) | |